

Overload Committee PO BOX 470 Shortland Street Auckland CBD 1140 New Zealand info@overload.co.nz

Parental/Guardian Consent Form for Overload Artist Table Registration at Overload NZ Anime & Manga Convention

I, the undersigned,, hereby consent to the booking of an Overload Artist Table at the Overload New Zealand Anime & Manga Convention for my child,, who is under the age of 16.	
Child's Full Name:	Date of Birth:
Contact Email:	
Contact Mobile Number:	
I understand and agree to the following terms	s and conditions:
 I acknowledge that my child is interested in Overload convention. 	n registering an Overload Artist Table at the
2. I understand that the Overload event may the public, and other activities related to the o	involve the sale of merchandise, interaction with convention.
 I hereby consent to my child's participation associated with it. 	in the Overload convention and any activities
4. I agree to be responsible for ensuring my cand regulations set forth by the Overload Cor	child's attendance and compliance with all rules mmittee.
I understand that Overload is not responsil incurred during the event.	ble for any personal or property damage or loss
6. I agree to supervise my child and ensure the convention.	heir appropriate behaviour during the
7. I acknowledge that this consent form is recensure that my child has all necessary permi	quired for my child to participate, and I will ssions and documents to attend the convention.
8. I release Overload and its organisers, volu illness, or loss my child may experience durir	inteers, and staff from any liability for any injury, ng the event.
Parent/Guardian's Full Name:	
Parent/Guardian's Signature:	
Date	